

**FORM
INSP**Rev
05/11**State of Colorado
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



DE	ET	OE	ES
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Inspection Date:

06/11/2012

Document Number:

668100096

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>336022</u>	<u>336022</u>		<u>KELLERBY, SHAUN</u>

Operator Information:OGCC Operator Number: 10079 Name of Operator: ANTERO RESOURCES PICEANCE CORPORATIONAddress: 1625 17TH ST STE 300City: DENVERState: COZip: 80202**Contact Information:**

Contact Name	Phone	Email	Comment
Black, Jon	970 625 9922/(435) 237-1169	jblack@anteroresources.com	Operations Manager: Piceance Basin

Compliance Summary:QtrQtr: SWSW Sec: 9 Twp: 6S Range: 92W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
284504	WELL	PR	03/27/2007	GW	045-12189	HANGS B1	<input checked="" type="checkbox"/>
284505	WELL	PR	03/27/2007	GW	045-12190	HANGS B3	<input checked="" type="checkbox"/>
284506	WELL	AL	01/11/2012	LO	045-12191	HANGS B4	<input type="checkbox"/>
284507	WELL	AL	01/11/2012	LO	045-12192	HANGS B5	<input type="checkbox"/>
284533	WELL	AL	01/11/2012	LO	045-12196	HANGS B2	<input checked="" type="checkbox"/>
289329	WELL	XX	03/04/2008	LO	045-13711	HANGS B8	<input checked="" type="checkbox"/>
289330	WELL	AL	01/11/2012	LO	045-13710	HANGS B7	<input type="checkbox"/>
289331	WELL	AL	01/11/2012	LO	045-13709	HANGS B9	<input type="checkbox"/>
336022	LOCATION	AC			-	HANGS-66S92W 9SWSW	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: _____	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location**Signs/Marker:**

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			

Inspector Name: KELLERBY, SHAUN

TANK LABELS/PLACARDS	Satisfactory			
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Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TRASH	Unsatisfactory	Trash and debris around the edge of pad.	Remove all trash and debris from pad site.	06/30/2012

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory	Stock panel		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Gathering Line		Satisfactory			
Emission Control Device	1	Satisfactory			

Venting:

Yes/No	Comment
NO	

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 336022

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:**Comment:** _____**CA:** _____ **Date:** _____**Wildlife BMPs:****Comment:** _____**CA:** _____ **Date:** _____**Stormwater:**

Erosion BMPs	Present	Other BMPs	Present

Corrective Action: _____ Date: _____

Comments: Erosion BMPs: _____

Other BMPs: _____

Comment: _____**Staking:****On Site Inspection (305):**Surface Owner Contact Information:

Name: _____

Address: _____

Phone Number: _____

Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____

Phone Number: _____

Date Onsite Request Received: _____

Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Facility

Facility ID: 284504 Type: WELL API Number: 045-12189 Status: PR Insp. Status: PR

Facility ID: 284505 Type: WELL API Number: 045-12190 Status: PR Insp. Status: PR

Facility ID: 284533 Type: WELL API Number: 045-12196 Status: AL Insp. Status: IO

Inspector Name: KELLERBY, SHAUN

Facility ID: 289329 Type: WELL API Number: 045-13711 Status: XX Insp. Status: ND

Facility ID: 336022 Type: LOCATION API Number: - Status: AC Insp. Status: AO

Environmental

Spills/Releases:

Type of Spill: Description: Estimated Spill Volume:
Comment:
Corrective Action: Date:
Reportable: GPS: Lat Long
Proximity to Surface Water: Depth to Ground Water:

Water Well:

DWR Receipt Num: Owner Name: GPS : Lat Long

Field Parameters:

Sample Location:

Emission Control Burner (ECB):

Comment:

Pilot: Wildlife Protection Devices (fired vessels):

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: Date Interim Reclamation Completed:

Land Use:

Comment: part of pad site has been fenced off, no live vegetation growing, dead weeds

1003a. Debris removed? Pass CM
CA CA Date
Waste Material Onsite? Pass CM
CA CA Date
Unused or unneeded equipment onsite? Pass CM
CA CA Date
Pit, cellars, rat holes and other bores closed? Fail CM Conductor pipe is open in cellar
CA Close conductor CA Date 06/30/2012
Guy line anchors removed? In CM
CA CA Date
Guy line anchors marked? Pass CM
CA CA Date

1003b. Area no longer in use? In Production areas stabilized ?

1003c. Compacted areas have been cross ripped?

Inspector Name: KELLERBY, SHAUN

1003d. Drilling pit closed? Pass Subsidence over on drill pit? _____
Cuttings management: _____
1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? In
Production areas have been stabilized? Pass Segregated soils have been replaced? _____
RESTORATION AND REVEGETATION
Cropland
Top soil replaced _____ Recontoured _____ Perennial forage re-established _____
Non-Cropland
Top soil replaced _____ Recontoured _____ 80% Revegetation _____
1003 f. Weeds Noxious weeds? _____
Comment: _____

Overall Interim Reclamation

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____
Final Land Use: _____
Reminder: _____
Comment: _____
Well plugged _____ Pit mouse/rat holes, cellars backfilled _____
Debris removed _____ No disturbance /Location never built _____
Access Roads Regraded _____ Contoured _____ Culverts removed _____
Gravel removed _____
Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____
Compaction alleviation _____ Dust and erosion control _____
Non cropland: Revegetated 80% _____ Cropland: perennial forage _____
Weeds present _____ Subsidence _____
Comment: _____
Corrective Action: _____ Date _____

Overall Final Reclamation

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Gravel	Pass	Culverts	Pass			
		Paving	Pass			

S/U/V: Satisfactory Corrective Date: _____

Comment: No BMP to prevent storm water to leave pad and enter the ditch along the county road.

CA: _____